

STATE OF NEW JERSEY
DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES
REQUEST FOR PROPOSALS

Mental Health Cultural Competence Training Centers

October 31, 2011

Lynn Kovich, Assistant Commissioner
Division of Mental Health and Addiction Services

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**REQUEST FOR PROPOSALS
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES**

I. INTRODUCTION – Mental Health Cultural Competence Training Centers

The Division of Mental Health and Addiction Services (DMHAS) within the New Jersey Department of Human Services has a long-standing commitment to culturally competent, responsive care and addressing the unique mental health needs of multicultural populations. *Cultural Competence is defined as those policies, skills, attitudes and methods that enable practitioners and programs to work effectively across cultures.*

DMHAS is announcing the availability of annualized funding in the amount of \$470,000 to develop two (2) regional “Mental Health Cultural Competence Training Centers” to provide knowledge, training, technical assistance and serve as a resource regarding multicultural issues in mental health. Each Cultural Competence Training Center will be awarded a sum of up to \$235,000. It is anticipated that an agency’s organization, structure, policies and procedures, practices and attitudes will be modified as a result of the services provided by the Culturally Competent Training Centers. It is expected that each Training Center will survey, monitor and assess the effectiveness of the interventions they provide in measurable outcomes.

Staff employed by DMHAS funded agencies (especially clinical staff) must be culturally and linguistically competent in providing care, services, treatment, communications, systems development and advocacy issues on behalf of targeted populations. They should be skilled in “change agent” interventions designed to produce fundamental, systemic and practice changes in all aspects of an agency. It is expected that all levels of staff including leadership represent an integral part of implementing cultural competence. In addition, an agency’s structure, physical plan, practice and program will be significantly impacted by the interventions provided by the Training Centers. Through this request, DMHAS is soliciting proposals from locally-based, community agencies or statewide organizations to support the hiring of culturally competent leadership staff to develop two Cultural Competence Training Centers that will provide knowledge and technical assistance to clinicians, consumers, self help centers, community providers, families and other entities as designated by DMHAS. It is critical that the entire mental health system be a focus of service provision.

Applications will be received, evaluated and, if contracts are awarded, monitored by the DMHAS Multicultural Services Advisory Committee and the Office of Multicultural Services. The award of these grants will be made on a competitive basis.

II. BACKGROUND

New Jersey is one of the most culturally and linguistically diverse states within our nation. U.S. Census Bureau, both state and county data (reference-Quickfacts.<http://quickfacts.census.gov/qfd/states/34000.html>) indicates that as of March, 2000, New Jersey was one of six states with a foreign-born population of one million or more, ranking third in the nation's foreign-born population. Currently, more than the 36% of the state's population is Black, Hispanic, Asian, Pacific Islander or Native American or Alaskan Native.

The national data regarding mental health and health disparities indicates there are clinicians, agency staff and other important parts of institutions that lack cultural competency which indicates access, availability and provision of culturally competent care needs to be substantially improved. A lack of cultural competence will negatively affect clinical outcomes for clients who are not from majority cultures. Georgetown University's National Center for Cultural Competence, has identified the following *systemic, organizational, programmatic levels at which cultural competence interventions should be employed*:

- (a) Policy making and plans
- (b) Infrastructure building
- (c) Program administration and evaluation
- (d) The delivery of services and enabling supports
- (e) Treatment Planning
- (f) Staff training

Additionally, Georgetown Center has identified the following *individual level cultural competencies*:

- (a) Value diversity and similarities among all peoples
- (b) Understand and effectively respond to cultural differences
- (c) Engage in cultural self-assessment at the individual and organizational levels
- (d) Make adaptations to the delivery of services enabling supports
- (e) Institutionalize cultural knowledge (**Tervalon & Murray-Garcia, 1998**).

The DMHAS Multicultural Services Advisory Committee (MSAC), formed in 1981, has a mission to improve both in quantity and quality the capacity for the New Jersey DMHAS to provide culturally competent mental health services. This can be addressed through education and service delivery strategies that are appropriate to the lifestyles, special needs, and strengths of New Jersey's diverse minority and cultural groups. MSAC members include DMHAS staff, community, consumers and academic participants. The MSAC Committee has also developed a strategic plan that includes recommendations for a number of key initiatives including mini-grant funding and a continual focus on training and technical assistance needs of agencies across the care continuum.

In response to MSAC recommendations, DMHAS created an Office of Multicultural Services in 1989 to ensure that mental health services are culturally sensitive, culturally competent, accessible, and in a language understood by consumers and families. This office also ensures that staff orientation and training programs address the cultural competence of mental health professionals and that agencies develop their individual cultural competence plans. Additionally, as New Jersey's Division of Mental Health and Addiction Services has adopted and practiced key principals in consumer empowerment, Wellness and Recovery, and is moving towards a "transformed system", cultural competence remains an essential element in that process. To administer the on-going development of clinicians' and agencies' cultural competence skills, the Division of Mental Health and Addiction Services, Office of Multicultural Services is seeking proposals for funding two (2) Mental Health Cultural Competence Training Centers.

III. PROJECT PURPOSE

This initiative is focused on designing and implementing measurable strategies to increase an agency's capacity to provide culturally competent mental health care.

Community mental health agencies and their staff including leadership, practioners and support staff, require information, knowledge and skills focused on improving their capacity to become a culturally competent system of care. The purpose of this Mental Health Cultural Competence Training Centers Request For Proposals is to provide the training resources and technical assistance to all levels of staff including leadership within an agency. These skills are needed to build mental health professionals', consumers, and agencies' cultural competence skills, to better equip clinicians, and to improve treatment outcomes for consumers from diverse ethnic and linguistic groups.

IV. GOALS:

All individuals who work with consumers of the mental health system in New Jersey are in need of a solid, consistent and basic foundation in delivering culturally competent treatment. The Cultural Competence Training Centers provide onsite technical assistance and resources to develop an individualized cultural competency plan at each agency, focused on measurable strategies for implementation that ultimately affect care. Additionally, it is expected they will develop curriculum, and provide trainings with CEU's to promote Basic, Intermediate and Advanced cultural and linguistic competence skills focused on the needs and skill development of all levels of staff. *The goal of this RFP is to develop the systemic capacity to design and implement a curriculum that will provide training and technical assistance for self help centers, community mental health agencies, their administrators and clinicians.* Training center staff will provide on-going cultural competence training designed to increase cultural competence skills of mental health administrators and clinicians at state funded mental health agencies, including self help centers (i.e., providing a welcoming agency environment, improving the capacity of self help centers to provide

access to a variety of ethnic and linguistic groups, and building trust by listening to, respecting and addressing consumers' treatment concerns, barriers and issues and addressing issues of access ultimately impacting mental health disparities).

Since there will be two Cultural Competence Training Centers, we are seeking demonstrable skills and abilities focused on effective collaboration between the two training centers. Both centers should utilize the following to guide their work:

1. The Center for Mental Health Services (2000). Cultural Competence Standards in Managed Mental Health Care Services (SAMHSA Standards).
2. The Regulations/Standards Governing Community Mental Health Services in the New Jersey Administrative Code – Title 10.
3. Current demographics and needs of consumers and families served by New Jersey Division of Mental Health and Addiction Services.
4. The use of data to demonstrate outcomes.
5. A specific plan to address and effect standardize intervention amenable to benchmarking and potential for research in this area.
6. A demonstrable understanding of the current philosophical, and programmatic focus of the Division of Mental Health and Addiction Services, i.e. Wellness and Recovery, Olmstead, Advanced Directives, etc.

It is anticipated with the use of “promising practice standards”, staff, consumers, and families will receive effective and measurable technical assistance, training, and workforce development.

V. OBJECTIVES

- A. The Cultural Competence Training Centers will develop and/or adopt outcome oriented interventions including technical assistance, workforce development and training curricula that include the topics listed below:
 - a. Policy Development strategic planning, mission, vision, value statement and the role of leadership
 - b. Infra-structure building
 - c. Program administration and evaluation
 - d. The delivery of services and enabling supports
 - e. Cultural and Linguistic Assessment and Treatment Planning
 - f. Workforce Development, Supervision and Staff Training
 - g. Quality Improvement, Management and Monitoring

- B. The Cultural Competence Training Centers staff will provide technical assistance to DMHAS contracted agencies and self help centers who request such assistance (i.e., agency cultural self assessment and development and implementation of cultural competence plan). Additionally, they will serve as a motivating force for DMHAS contracted agencies and self help centers who may not yet have developed a genuine motivation in becoming culturally competent.
- C. Cultural Competence Training Center staff will be master's level and have at least four (4) years of mental health and cultural competence training experience.

During a contract year, each Cultural Competence Training Center will provide a variety of conferences, workshops and workforce development initiatives. These Forums (conferences, workshops, etc.) should be developed based upon the assessment of cultural and linguistic needs of agencies, consumers, staff and the specific focus of our public mental health system. Programs should be geared towards gaining knowledge, skills, and changes in practices. It is expected that through demonstrable collaboration and cooperation Training Centers will share their conference training plans with one another and avoid duplication of services. It is expected that each Cultural Competence Training Center will provide the following:

- 1. Six (6) Cultural Competence skill building trainings to at least two-hundred (200) mental health administrators, clinicians, self help center managers/facilitators, screeners, case managers per contract year.
 - 2. One (1) conference, at least one-hundred (100) mental health administrators, clinicians, self help center managers/facilitators, screeners, case managers per contract year.
 - 3. Four (4) additional trainings will be provided on selected cultural competence topics as determined from a needs assessment/survey. (i.e., Basic, Intermediate or Advanced Cultural Competence topics).
 - 4. Outreach technical assistance as indicated to individual contracted agencies and self help centers or to small groups of the above.
 - 5. On site visits and attendance at case conferences, treatment planning meetings, and other and other forums to provide training, modeling and implementation of cultural competence concepts.
- E. Examples of priority topics on specific populations for Cultural Competence Training Centers include: (in alphabetical order)
 - 1. African - Americans
 - 2. Asian – Americans
 - 3. Hispanics or Latino – Americans
 - 4. Native – Americans

5. Other ethnic multicultural groups

- F. Trainers will use promising practice and/or evidence-based education methods to significantly increase attendees' and participants' culturally competence knowledge and/or attitudes and/or behaviors. (i.e., increase in cultural competence knowledge, attitudes and behaviors related to culturally competent policies, procedures, mission statements and the examination of practitioners' ethnocultural context with practitioners' self-assessments.)
- G. It is expected that both pre and post tests and other methods to demonstrate outcomes will be utilized to assess the impact of each training and outcomes will be reported to the DMHAS Office of Multicultural Services quarterly.
- H. A mechanism will be developed to measure the implementation of cultural competence principles on an ongoing basis once the training and technical assistance has been completed. An integral focus of the training and technical assistance will be the incorporation of culturally competent principles in client assessment and treatment.
- I. It is expected that both Cultural Competence Training Centers will collaborate and utilize standard approaches and interventions in service delivery. The outcomes of formalized collaborations will be reported to the DMHAS Office of Multicultural Services on an ongoing basis.

VI. FUNDING AVAILABILITY

DMHAS has allocated an annualized sum of \$470,000 for the development of two Cultural Competence Training Centers. Each Cultural Competence Training Center will be awarded a sum of up to \$235,000. Final Awards will be made on **February 2, 2012**. Start up for these programs is projected for March 1, 2012.

Service Areas

The service area for the Central/Southern Region Cultural Competence Training Center consists of the following counties:

Atlantic	Cumberland	Monmouth
Burlington	Gloucester	Ocean
Camden	Mercer	Salem
Cape May	Middlesex	Union

The service area for the Northern Region Cultural Competence Training Center consists of the following counties:

Bergen
Essex
Hudson

Hunterdon
Morris
Passaic

Sussex
Somerset
Warren

Successful applicants will be funded starting February 9, 2012. Funding awards will be made consistent with the awardee's fiscal year, i.e. the phase-in year will begin February 9, 2012 and end at the end of the awardee's fiscal year, after which the first full year of operational funding will begin. Funding will be awarded dependant upon funding availability and success in attaining project goals. No grant awarded under this program is automatically extended beyond a second year. Continued funding depends on available appropriations and the funded agency's successful completion of contract objectives.

VII CRITERIA FOR PROPOSALS

All proposals must:

1. Provide a description of the provider agency including current mission and services as well as whether or not the agency has a Cultural Competence plan and a copy of the Plan if applicable.
2. Identify target populations and the need for the proposed service.
3. Provide a detailed description of the proposed project including goals and objectives.
4. Clearly demonstrate project feasibility within time and budget parameters. Include a program phase in schedule if applicable.
5. Demonstrate support and cooperation from local community based agencies and self help centers funded through DMHAS who will participate in the project.
6. Demonstrate the ability to collaborate with local service providers to ensure access to a full array of culturally linguistically competent , wellness and recovery services.
7. Describe the anticipated impact of the program on local service delivery.
8. Provide an evaluation of the project including a detailed evaluative plan focused on measuring the outcomes of interventions and if indicated modifications of services. The plan should provide specific detail regarding the use of self-assessment scales, pre and post tests, agency/organizational assessments, etc.
9. Include budget (see Section IX).

10. Explain how the proposed “Mental Health Cultural Competence Training Center” will continue upon completion of the one year grant period and /or a possible second year extension.
11. Include an agreement by grantees to provide the DMHAS Office of Multicultural Services with project updates on a quarterly as well as when requested at other periods during the contract year. The agreement must state the grantee’s intention to work with the Office of Multicultural Services throughout the project period and to closely collaborate with each other.
12. Demonstrate a conceptual and practical understanding of the philosophic, programmatic, and organizational focus of New Jersey’s public mental health system.
13. Provide a description regarding how you intend to plan and develop standardized tools and effective collaboration with other Training Centers.

VIII. PROVIDER QUALIFICATIONS

In order to be eligible for funding:

1. The applicant must be a fiscally viable for-profit or non-profit organization or governmental entity.
2. The applicant must be duly registered to conduct business in the State of New Jersey.
3. The applicant must currently meet, or be able to meet, the terms and conditions of the Department of Human Services’ contracting rules and regulations as set forth in the Standard Language Document, the Contract Reimbursement Manual (CRM), and the Contract Policy and Information Manual (CPIM).
4. Non-public applicants must demonstrate that they are incorporated through the New Jersey Department of State and provide documentation of their current non-profit status under Federal IRS 501 (c) (3) regulations, as applicable.
5. Clearly demonstrate a history of success at being responsive to the needs and preferences of a culturally, linguistically, and ethnically diverse population of consumers through the provision of innovative service delivery approaches and proven capacity to provide training, educational and technical assistance services in a culturally responsible and sensitive manner as outlined. (Outcome measures that demonstrate the successful implementation of training and technical assistance will strengthen application.)
6. Demonstrate active and meaningful involvement of a broad spectrum of culturally diverse staff and consumers in all aspects of agency operations, including but not limited to: board participation; formulation of policies and

procedures; quality improvement functions; staff orientation and training; and program and curriculum development and review, and outcome measures.

IX. PROPOSAL REQUIREMENTS

The RFP shall address the responding agency's plans for how they will design, implement, and evaluate the proposed initiative for a Mental Health Cultural Competence Training Center that incorporates the goals and criteria outlined in this document. Applicants will provide the following within ten (10) pages (excluding budget information and letters of support):

- A. Narrative description of program elements to include:
 - 1. Overview
 - 2. Purpose of Project
 - 3. Goals
 - 4. Implementation/Timetable and Calendar of Events
 - 5. Detailed description of the evaluation process including measurable outcomes.
- B. If any sub-contracts will be used in the delivery of services, explain and provide details.
- C. Staffing:
 - 1. Job description for each position, including minimum qualifications and salary range.
 - 2. Supervision procedures for monitoring staff performance.
 - 3. Training plan specific to this program, for any current and new staff involved in this service.
 - 4. Address staff cultural competence
 - 5. Table of organization showing how the proposed program is integrated in the agency's structure.
- D. Budget
 - 1. Provide an outline of the program budget using Annex B categories. Identify phase-in and one-time budgets (if applicable) separately from annualized operational costs.
 - 2. Utilization of the DHS legal-sized budget forms and schedules, as well as the DMHAS Budget Matrix software, are discouraged for this submission. Instead, applicants may utilize software that is familiar and available, in order to present the budget information in a format that is required throughout the DHS/DMHAS contracting system. The annualized and phase in budgets must display line-item detail, organized according to these major categories:

- Personnel Services (including fringe benefits);
 - Consultant and Professional Services;
 - Materials and Supplies;
 - Facility Costs;
 - Special Assistance
 - Other Costs;
 - General and Administrative (G&A) Expenses;
 - Net Operating Cost;
 - Revenue Offsets (fees, grants, contributions, subsidies);
 - Net Deficit (requested DMHAS award amount).
3. All budget data, if approved and included in signed contracts, will be subject to the provisions of the DHS Contract Policy and Information Manual and the DHS Contract Reimbursement Manual.
 4. Budget Notes are often useful to help explain costs and assumptions made regarding certain non-salary expenses and the calculations behind various revenue estimates (if any). Please note that reviewers will need to fully understand the budget projections from the information presented, and failure to provide to provide adequate information could result in lower ranking of the proposal. Please provide Budget Notes if you believe such notes would assist the reviewers.
 5. Staff Fringe Benefit expenses may be presented as a percentage factor of total salary costs, and should be consistent with your organization's current Fringe Benefits percentage.

E. Agency Accountability

Provide a statement of the applicant's mission and goals. Indicate experience of the applicant's past success at being responsive to the needs and preferences of consumers in delivery of service, as well as any methods used to determine what specific cultural competencies will be focused on. Also include a letter of commitment to implementing this project from the organization's Board of Directors or other appropriate governing body.

F. Funding proposal cover sheet (Attachment A)

H. Applicants who do not currently contract with the Division must also include the following:

- a. Organization history including mission, and goals.
- b. Overview of agency services.

- c. Documentation of incorporation status.
- d. Agency organization chart.
- e. Agency code of ethics and/or conflict of interest policy.
- f. Most recent agency audit.
- g. Listing of current Board of Directors, officers and terms of each.
- h. Documentation that agency meets qualifying requirements for DHS program contract.
- i. Current Agency Licensure/Accreditation Status.
- j. N.J.S.A. 52:34-13.2 Certification, Source Disclosure Certification form-DPA(formerly Executive Order 129) (signed and dated)
- k. P.L. 2005, Chapters 51 and 271 and Executive Order 117 (for profit organizations only) signed and dated
- l. Documentation of the Applicant's NJ Charitable Registration and Business Registration

Applicants with current DMHAS contracts must submit a statement asserting the DMHAS has current documentation on items "a" through "l" above. Any items that are not up-to-date must accompany the current proposal.

X. MANDATORY BIDDERS' CONFERENCE

All applicants intending to submit a proposal in response to this request must attend a **MANDATORY** Bidders' Conference. Kindly contact Phfedrah Adams at (609) 777-0674 to register for the bidder's conference. Proposals submitted by an applicant not in attendance at the bidder's conference will not be considered.

DATE: November 7, 2011
TIME: 1:00 p.m. – 3:00 p.m.
LOCATION: Division of Mental Health and Addiction Services
 Capital Center – 3rd floor – Room 336
 50 East State Street
 Trenton, NJ 08625

XI. SUBMISSION OF PROPOSALS

Please mail 10 hard copies (inclusive of original with signature page) and one electronic version in PDF format of your proposal to:

Bill Chepiga
Coordinator of Special Populations
Department of Human Services
Division of Mental Health and Addiction Services
Capital Center - PO Box 727
Trenton, NJ 08625-0727
Email: bchepiga@dhs.state.nj.us

Proposals **must be received at the above address by 4:00 p.m. on December 5, 2011** to be considered eligible. Submissions after that date and time will not be considered. You may mail or hand-deliver your response; however, the DMHAS is not responsible for items not received by the DMHAS due date.

Should you prefer to hand-deliver the RFP's, our physical address is:

**Capital Center
50 East State Street
3rd Floor, Trenton, NJ 08625**

Also submit two (2) copies, plus one electronic version to each of the County Mental Health Administrators in each of the counties within the service areas as designated in Section VI.A.

XII. REVIEW OF PROPOSAL AND NOTIFICATION OF PRELIMINARY AWARD

There will be a review process for all timely-submitted proposals that meet all the requirements outlined in this RFP.

DMHAS will convene an RFP review committee to review and score proposals submitted in response to the current RFP. This review committee will consist of State of NJ employees, including staff from the DMHAS Regional Offices, DMHAS Central Office and the DMHAS Bureau of Contracts Administration. Recommendations from the County Mental Health Boards are requested and will be considered in the award determination process. Recommendations from the County Mental Health Boards should be submitted by no later than **January 4, 2012** to ensure they are an integral part of the proposal evaluation process. Recommendations are to be submitted to Bill Chepiga, Coordinator of Special Populations, Division of Mental Health and Addiction Services.

DMHAS recognizes the invaluable perspectives and knowledge that consumers and family members possess regarding psychiatric services. Input from consumers and family members are integral components of a system that holds Wellness and Recovery principles at its core. Consequently, the Division will convene an advisory group consisting of consumers and family members to meet with members of the RFP review committee and provide their input regarding each of the proposals submitted. This input will be incorporated into the final deliberations of the review committee.

The DMHAS reserves the right to reject any and all proposals when circumstances indicate that it is in its best interest to do so.

The DMHAS will notify all applicants of preliminary award decisions by **January 19, 2012**.

XIII. APPEAL OF AWARD DECISIONS

Appeals of any determinations may be made only by the respondents to this proposal. All appeals must be made in writing and must be received by the DMHAS at the address below no later than **January 26, 2012** at 4:00 PM. The written request must clearly set forth the basis for the appeal.

Appeal correspondence should be addressed to:

**Lynn Kovich, Assistant Commissioner
Division of Mental Health and Addiction Services
Capital Center
50 E. State Street
PO Box 727
Trenton New Jersey 08625-0727**

Please note that all costs incurred in connection with any appeals of DMHAS decision are considered unallowable costs for purposes of DMHAS contract funding.

The DMHAS will review any appeals and render final funding decisions by **February 2, 2012**. Awards will not be considered final until all timely appeals have been reviewed and final decision rendered.

ATTACHMENT A

COVER SHEET

Date Received

**STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES**

Dept/Component **Mental Health Cultural Competence Training Centers**

Proposal Summary Information

Incorporated Name of Applicant: _____

Type: _____

Public _____ Profit _____ Non-Profit _____, or Hospital-Based _____

Federal ID Number: _____ Charities Reg. Number _____

Address of Applicant: _____

Address of Service(s): _____

Contact Person: _____ Phone No.: _____

Total dollar amount requested: _____ Fiscal Year End: _____

Total Match Required: _____ Match Secured: Yes _____ No _____

Funding Period: From _____ to _____

Services: _____

(For which funding is requested)

Total number of unduplicated clients to be served: _____

Brief description of services by program name and level of service to be provided*:

Authorization: Chief Executive Officer: _____

(Please print)

Signature: _____ Date: _____

*NOTE: If funding request is more than one service, complete a separate description for each service. Identify the number of units to be provided for each service as well as the unit description (hours, days, etc.) If the contract will be based on a rate, please describe how the rate was established.

**STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES**

**ADDENDUM TO REQUEST FOR PROPOSAL
Mental Health Cultural Competence Training Centers**

Executive Order No. 189 establishes the expected standard of responsibility for all parties that enter into a contract with the State of New Jersey. All such parties must meet a standard of responsibility which assures the State and its citizens that such parties will compete and perform honestly in their dealings with the State and avoid conflicts of interest.

As used in this document "provider agency" or "provider" means any person, firm, corporation, or other entity or representative or employee thereof which offers or proposes to provide goods or services to or performs any contract for the Department of Human Services.

In compliance with Paragraph 3 of Executive Order No. 189, no provider agency shall pay, offer to pay, or agree to pay, either directly or indirectly, any fee, commission, compensation, gift, gratuity, or other thing of value of any kind to any State officer or employee or special State officer or employee, as defined by N.J.S.A. 52:13D-13b and e, in the Department of the Treasury or any other agency with which such provider agency transacts or offers or proposes to transact business, or to any member of the immediate family, as defined by N.J.S.A. 52:13D-13i, of any such officer or employee, or any partnership, firm, or corporation with which they are employed or associated, or in which such officer or employee has an interest within the meaning of N.J.S.A. 52:13D-13g.

The solicitation of any fee, commission, compensation, gift, gratuity or other thing of value by any State officer or employee or special State officer or employee from any provider agency shall be reported in writing forthwith by the provider agency to the Attorney General and the Executive Commission on Ethical Standards.

No provider agency may, directly or indirectly, undertake any private business, commercial or entrepreneurial relationship with, whether or not pursuant to employment, contract or other agreement, express or implied, or sell any interest in such provider agency to, any State officer or employee or special State officer or employee having any duties or responsibilities in connection with the purchase, acquisition or sale of any property or services by or to any State agency or any instrumentality thereof, or with any person, firm or entity with which he is employed or associated or in which he has an interest within the meaning of N.J.S.A. 52:13D-13g. Any relationships subject to this provision shall be reported in writing forthwith to the Executive Commission on Ethical Standards, which may grant a waiver of this restriction upon application of the State officer or employee or special State officer or employee upon a finding that the present or proposed relationship does not present the potential, actuality or appearance of a conflict of interest.

No provider agency shall influence, or attempt to influence or cause to be influenced, any State officer or employee or special State officer or employee in his official capacity in any manner which might tend to impair the objectivity or independence of judgment of said officer or employee.

No provider agency shall cause or influence, or attempt to cause or influence, any State officer or employee or special State officer or employee to use, or attempt to use, his official position to secure unwarranted privileges or advantages for the provider agency or any other person.

The provisions cited above shall not be construed to prohibit a State officer or employee or special State officer or employee from receiving gifts from or contracting with provider agencies under the same terms and conditions as are offered or made available to members of the general public subject to any guidelines the Executive Commission on Ethical Standards may promulgate.

ATTACHMENT B

DEPARTMENT OF HUMAN SERVICES STATEMENT OF ASSURANCES

As the duly authorized Chief Executive Officer/Administrator, I am aware that submission to the Department of Human Services of the accompanying application constitutes the creation of a public document and as such may be made available upon request at the completion of the RFP process. This may include the application, budget, and list of applicants (bidder's list). In addition, I certify that the applicant:

- Has legal authority to apply for the funds made available under the requirements of the RFP, and has the institutional, managerial and financial capacity (including funds sufficient to pay the non Federal/State share of project costs, as appropriate) to ensure proper planning, management and completion of the project described in this application.
- Will give the New Jersey Department of Human Services, or its authorized representatives, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with Generally Accepted Accounting Principles (GAAP). Will give proper notice to the independent auditor that DHS will rely upon the fiscal year end audit report to demonstrate compliance with the terms of the contract.
- Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. This means that the applicant did not have any involvement in the preparation of the RFP, including development of specifications, requirements, statement of works, or the evaluation of the RFP applications/bids.
- Will comply with all federal and State statutes and regulations relating to non-discrimination. These include but are not limited to: 1.) Title VI of the Civil Rights Act of 1964 (P.L. 88-352; 34 CFR Part 100) which prohibits discrimination on the basis of race, color or national origin; 2.) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794; 34 CFR Part 104), which prohibits discrimination on the basis of handicaps and the Americans with Disabilities Act (ADA), 42 U.S.C. 12101 et. seq.; 3.) Age Discrimination Act of 1975, as amended (42 U.S.C. 6101 et. seq.; 45 CFR part 90), which prohibits discrimination on the basis of age; 4.) P.L. 2975, Chapter 127, of the State of New Jersey (N.J.S.A. 10:5-31 et. seq.) and associated executive orders pertaining to affirmative action and non-discrimination on public contracts; 5.) Federal Equal Employment Opportunities Act; and; 6.) Affirmative Action Requirements of PL 1975 c. 127 (NJAC 17:27).
- Will comply with all applicable federal and State laws and regulations.
- Will comply with the Davis-Bacon Act, 40 U.S.C. 276a-276a-5 (29 CFR 5.5) and the New Jersey Prevailing Wage Act, N.J.S.A. 34:11-56.27 et. seq. and all regulations pertaining thereto.
- Is in compliance, for all contracts in excess of \$100,000, with the Byrd Anti-Lobbying amendment, incorporated at Title 31 U.S.C. 1352. This certification extends to all lower tier subcontracts as well.
- Has included a statement of explanation regarding any and all involvement in any litigation, criminal or civil.

- Has signed the certification in compliance with federal Executive Orders 12549 and 12689 and State Executive Order 34 and is not presently debarred, proposed for debarment, declared ineligible, or voluntarily excluded. Will have on file signed certifications for all subcontracted funds.
- Understands that this provider agency is an independent, private employer with all the rights and obligations of such, and is not a political subdivision of the Department of Human Services.
- Understands that unresolved monies owed the Department and/or the State of New Jersey may preclude the receipt of this award.

Applicant Organization

Signature: Chief Executive Officer or Equivalent

Date
6/97

Typed Name and Title

ATTACHMENT C

**CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY
EXCLUSION
LOWER TIER COVERED TRANSACTIONS**

READ THE ATTACHED INSTRUCTIONS BEFORE SIGNING THIS CERTIFICATION.
THE INSTRUCTIONS ARE AN INTEGRAL PART OF THE CERTIFICATION.

1. The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by an Federal department or agency.
2. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Name and Title of Authorized Representative

Signature

Date

This certification is required by the regulations implementing Executive order 12549, Debarment and Suspension, 29 CFR Part 98, Section 98.510

**CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY
AND VOLUNTARY EXCLUSION
LOWER TIER COVERED TRANSACTIONS**

Instructions for Certification

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
2. The certification in this clause is a material representation of facts upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.
4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Non-Procurement Programs.

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.